	PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004									10/534,340												
-					13																	
CLAIMS AS FILED - PAR					(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY											
U.	S. NATIONAL	T					RATE	FÉE]	RATE	FEE											
ВА	ISIC FEE	SMALL EN	SMALL ENT. = \$ 150		RGE ENT. = \$ 300		BASIC FEE		OR	BASIC FEE	300											
EX	AMINATION FI	(4) =\$-\$	Satisfies PCT Article 33(1)- (4) =\$-507/\$ 100 -		other situations = 5-100/\$-200		EXAM. FEE	-]	EXAM, FEE	200											
SE	ARCH FEE	ALL other co	U.S. is ISA = \$50/\$100 ALL other countries = \$ 200/\$400		All other situations = \$ 250 / \$ 500		SEARCH FEE			SEARCH FEE	400											
FE	E FOR EXTRA	mir	minus 100 =		/ 50 =		X \$ 125 =	<u> </u>	1	X \$ 250 =												
το	TAL CHARGEA	9 m	inus 20 =	•			X \$ 25 =	<u> </u>	OR	X \$ 50 =												
INC	EPENDENT C		/ minus 3 = .				X \$ 100 =	<u> </u>	OR	X \$ 200 =												
MU	LTIPLE DEPEN	IDENT CLAIM PF	RESENT					+ \$ 180 =		OR	+ \$ 360 =											
• If the difference in column 1 is less than zero, enter "0" in						olumn 2	. •	TOTAL	L	OR	TOTAL	900										
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY																						
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER NUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE										
	Total	1	Mınus	-20)	z		X \$ 25 =		OR	X \$ 50 =											
	Independent	. (Minus	<u>, 2</u>		=		X \$ 100 =		OR	X \$ 200 =											
•	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =											
				1	FEE		OR	TOTAL ADDIT. FEE														
		(Column 1)		(Colum	ın 2)	(Column 3)																
윘		CLAIMS REMAINING ALICE AMENDMENT		HIGHE NUMB FREVIOU PAID F	ST IER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TICNAL FEE										
	Total	• ************************************	Minus	••		=		X \$ 25 =		OR	X \$ 50 =											
	Independent	•	Minus	•••		=		X \$ 100 =		OR	X \$ 200 =											
	FIRST PRES	ENTATION OF N	IULTIPLE DEPI	ENDENT C	LAIM		L	+ \$ 180 =		OR	+\$ 360 =											
		,		7	OTAL ADDIT. FEE		OR	TOTAL ADDIT.														
							*		•													
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.																						
***	If the Highest Nur	mber Previously Pal	M FOC IN THIS SP M GAC IN THIS SP	PACE is less PACE is less	than 'T	v, ener zv. Lenis T.	n the	appropriate box	in column 1.	* If the entry in column 1 is less than the entry in column 2, write "I" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "30". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

FORM PTO-076 (Rev. 02/2005

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